

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	E.H.		06-11-01
O.I.P.E. CLASSIFIER		10	6-20-01
FORMALITY REVIEW	MD	529	8/7/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 (Through numeral)..... Canceled A Appeal
 - Restricted O Objected

Claim	Date
Final	
Original	
1	07/15/01
2	07/15/01
3	07/15/01
4	07/15/01
5	07/15/01
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9	07/15/01
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50	07/15/01

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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BEST AVAILABLE COPY

10-1-01
8-7-01